PATENT APPLICATION F DETERMINATION RECO								Application or Docket Number					
	PATENT	ORD 🕜	•	٠ سير ا									
	Effective ober 1, 1997												
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SM/ TY		ENTITY	OR	OTHER SMALL	THAN. ENTITY	
FOF	l	NUM	IBER FILED	١	IUMBER	RAT	E	FEE		RATE	FEE		
BAS	IC FEE						,	395.00	OR		790.00		
TOTA	AL CLAIMS		minu	s 20 =		x\$11	=		OR	x\$22=			
INDE	PENDENT CL	AIMS	min	us 3 = •		x41	=		OR	x82=			
MUL	TIPLE DEPEN	DENT CLAIM P	RESENT			+135			Oh				
* If the difference in column 1 is less than zero, enter "0" in column 2								_		OR	+270=		
•					TOTA	L L		OR	TOTAL				
		(Column 1)	S AMENDED		" mn 2)	(Column 3)	SMALL ENTIT		ENTITY	OR	OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMEN		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	•	Minus	**		=	x\$11	=		OR	x\$22=		
AME	Independent	*	Minus	***		=	x41=	=		OR	x82=		
	FIRST PRESENTATION OF MULTIPLE			DEPENDENT CLAIM			+135	=		OR	+270=		
							TOT ADDIT, F			OR	TOTAL VDDIT, FEE		
		(Column 1) CLAIMS		(Colu	i	(Column 3)	1				WUII. FEE		
MENT B		REMAINING AFTER AMENDMEN		NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA	RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	x\$11	=		OR	x\$22=		
AMEND	Independent	•	Minus	***		-	x41=	=		OR	x82=		
۷	FIRST PRESENTATION OF MULTIPLE DEPE				DENT CL	AIM	+135	=		OR	+270=		
	(Column 4)						TOT ADDIT, F			OR	TOTAL		
	<u> </u>	(Column 1) CLAIMS			mn 2) HEST	(Column 3)	1			,	ADDIT. FEE	<u> </u>	
ENT C	,	REMAINING AFTER AMENDMEN		NUM PREVI	IBER	PRESENT EXTRA	RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE,	
AMENDMENT	Total	•	Minus	••		=	x\$11	=		OR	x\$22=		
	Independent	*	Minus	***		=	x41:	=		OR	x82=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135	=		OR	+270=		
***	* If the entry is column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												
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	PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number					
-	Effective October 1, 2000									01/162607				
	CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
1	TOTAL CLAIN	<b>AS</b>	Colur	(Column 1) (C			Olumn 2) TYPE			OR		L ENTITY		
	OR	Au n cò c		1925	ALTO TELE	RAT	E	FEE		RATE	FEE			
#	OTAL CHARG	EABLE CLAIMS		R FILED	NUMBER EXTRA		BASIC	FEE		OR	BASIC FE	ESLC		
11		10 n	ninus 20=	-		X\$ 9= ²			OR	X\$18=				
-11	INTERIOR DENT		ninus 3 =	in	and the second	X40	=		OR	X80=	1 /			
Ľ	OCTIFLE DEP	ENDENT CLAIM	PRESENT	RESENT			+135			7		+-		
•	* If the difference in column 1 is less than zero, enter "0" in column 2									OR	<u> </u>	1/		
	CLAIMS AS AMENDED - PART II							L		OR		XIX		
-	DE IT	(Colun	SMAI	L EN	LENTITY OR		OTHER SMALL	R THAN ENTITY						
AMENDMENT A	1.	CLAIMS REMAINING AFTER		HIGHI NUME	BER	PRESENT			ADDI-	7 1		ADDI-		
MEN		AMENDMENT		PREVIO PAID F		EXTRA	RATE		IÓNAL FEE		RATE	TIONAL FEE		
S	Total	1.12	Minus	1.30	2	-	X\$ 9=			OR	X\$18=	1		
AM	Independent	I. 2	Minus	1 3	<u> </u>	=	X40=	1		1 1	X80=			
<u></u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR				
										OR	+270=			
	(Column 1) (Column 2) (Column 2)							E		OR A	TOTAL DDIT, FEE	1800-0		
8	CLAIMS REMAINING			(Column 2) (Column 3)				T .	00:					
MENDMENT		AFTER -		PREVIOU	JSLY	PRESENT EXTRA	RATE		DDI- ONAL		RATE	ADDI- TIONAL		
<u>N</u>	Total	•	Minus	PAID F	OR .	=			EE	-		FEE		
ZEN	Independent	•	Minus			= .	X\$ 9=			OR	X\$18=			
٨	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDENT (	CLAIM	4	X40=			OR	X80=			
	- 9	+135=			OR	+270=								
	TO										TOTAL			
		(Column 1)		(Column		(Column 3)	ADDIT. FE	- <del> </del>		ı A	DDIT. FEE			
ပ E	1 <b>3 m</b> 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CLAIMS REMAINING AFTER	** BE:	HIGHES	R	PRESENT			DDI-	ſ		ADDI-		
MEN		AMENDMENT	Section 1980	PREVIOU PAID FO		EXTRA	RATE		NAL EE		RATE	TIONAL FEE		
2	Total	•	Minus	••		=	X\$ 9=	Ť		OR	X\$18=	155		
A P	Independent	NTATION CT	Minus	***		=	X40=	+		<u> </u>	X80=			
OR OR OR MIGETIPLE DEPENDENT CLAIM														
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.														
****Iİ	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
	45 ,	uer Previously Paid	For (Total or	Independent	) is the t	highest number k	ound in the a	propri	ate box	in colun	nn 1.			
AM P	TO-875					• / · (, v )	<u>्र । । । ५ ५, ५, , , , , , , , , , , , , ,</u>							